

**TRANSMITTAL
FORM**

Application Serial Number	10/808,722
Filing Date	March 25, 2004
First Named Inventor	Beck
Group Art Unit	3743
Examiner Name	Not yet assigned
Attorney Docket No.	BKP-012
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

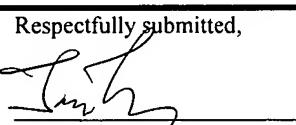
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) (<i>please identify below</i>) Change of Correspondence Address
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]		
<input type="checkbox"/> Petition for Extension of Time		
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
 Kirkpatrick & Lockhart Nicholson
 Graham LLP
 75 State Street
 Boston, MA 02109-1808
 Tel. No.: (617) 261-3100
 Fax No.: (617) 261-3175

SIGNATURE BLOCK

Date: January 23, 2006
 Reg. No. 54,089
 Tel. No.: (617) 261-3189
 Fax No.: (617) 261-3175

Respectfully submitted,

 James E. Fajkowski
 Attorney for Applicant(s)
 Kirkpatrick & Lockhart Nicholson
 Graham LLP
 75 State Street
 Boston, MA 02109-1808

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS**

Application

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

Application Number	10/808,722
Filing Date	March 25, 2004
First Named Inventor	Beck
Art Unit	3743
Examiner Name	Not yet assigned
Attorney Docket Number	BKP-012

Please change the Correspondence Address for the above-identified application to:

The address associated with
Customer Number: 022832

OR

Firm or
Individual Name

Address

City	State	Zip
------	-------	-----

Country

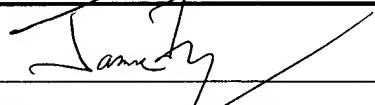
Telephone	Fax
-----------	-----

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- Applicant/Inventor.
- Assignee of record of the entire interest.
- Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- Attorney or agent of record. Registration Number 54,089.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature



Typed or Printed
Name James E. Fajkowski

Date January 20, 2006	Telephone 617-261-3189
-----------------------	------------------------

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Beck et al. CONFIRMATION NO.: 5639
SERIAL NO.: 10/808,722 GROUP NO.: 3743
FILING DATE: March 25, 2004 EXAMINER: Not yet assigned
TITLE: Method and Device Responsive To Diaphragmatic Activity for Adjusting Positive Pressure Assist During Expiration

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 23rd day of January, 2006.



Mary Higdon

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Change of Correspondence Address (1 pg.); and
3. Return Receipt Postcard.